	Substitute	for Form PTO-875	TION RECORD	Appl	hrough 7/31/2006. OMB 0651 S. DEPARTMENT OF COMME splays a valid OMB control nui calion of Dockel Number
C	LAIMS AS FILED - F		CALALL CO		OTHER THAN
FOR	NUMBER FILED	(Column 2)	SMALL EN	TITY OR	SMALL ENTITY
BASIC FEE (37 CFR 1.16(a))	NOMBER FILED	NUMBER EXTRA	RATE	FEE	RATE FEE
TOTAL CLAIMS				OR	
(37 CFR 1.16(c)) INDEPENDENT CLAIMS	minus 20 =		X \$=	OR	Y
(37 CFR 1.16(b))	minus 3 =		X \$ =		X \$=
MULTIPLE DEPENDENT CLA	IM PRESENT (37 CF	R 1.16(d))		OR	X \$=
If the difference in column			<del>  + s =    </del>	OR	+\$=
			TOTAL	OR	TOTAL
AMDT (Colu	111.5	olumn 2) (Column 3)	SMALL ENTIT	Y OR	OTHER THAN
O -   RENIA	AINING NI	SHEST IMBER PRESENT			SMALL ENTITY
I AMENI		MOUSLY EXTRA	TIO	VAL \	RATE ADDI- TIONAL
Tafal	Minus "	15 = _	FE		FEE
Independent (37 CFR 1.16(b))	Minus	7 =	X 5	OR	x \$
FIRST PRESENTATION OF	MULTIPLE DEPENDENT CLAI		× \$=	OR	x s=
	MOLTIFEE DEPENDENT CLAI	M (37 CFR 1.16(d))	+ 5=	OR	+\$ =
•			TOTAL ADD'L FEE		TOTAL ADD'L FEE
(Column CLAIM	46	umn 2) (Column 3)			
REMAIN AFTEI	ING NUMI	BER PRESENT	RATE ADDI		
AMENDM			TIONA		RATE ADDI- TIONAL
(37 CFR ) 16(ci)	Minus ''	2	FEE	-  -	FEE
Independent : (37 CFR 1 16(b)) .	Minus	=	X \$=	OR X	\$=
FIRST PRESENTATION OF MU	LTIPLE DEPENDENT CLASS		X \$=	OR X	s =
	CAUCITY CCAIM	(37 CFK 1.16(d))	+ \$ =	OR +	=
			TOTAL ADD'L FEE		TAL D'L FEE
(Column 1) CLAIMS	(	2) (Column 3)			
REMAINING	G HIGHES NUMBER	T R PRESENT	BATE	7	
AFTER AMENDMEN	PREVIOUS PAID FO	SLY EXTRA .	RATE ADDI- TIONAL		RATE ADDI-
Total • CFR 1.16(c))	Minus **	2	FEE	1	TIONAL FEE
dependent • CFR 1.16(b))	Minus · · · ·		<u> </u>	OR X \$_	=
ST PRESENTATION OF A THE		<u>  ×</u>	=	OR X \$_	=
ST PRESENTATION OF MULTIF	PLE DEPENDENT CLAIM (3)	CFR 1.16(d))	\$=	OR + s	
e entry in column 1 is less th e "Highest Number Previous		T	OTAL DO'L FEE	TOTA	

Ine riignest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  613570 - 0006  09/885										31				
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL TYPE	EN	ITITY	OR	OTHER SMALL			
TOTAL CLAIMS			37	37				RATE		FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EΕ	355.00	OR	BASIC FEE	710.00	3. 61
TOTAL CHARGEABLE CLAIMS			37 minus 20=		. 1-	17		X\$ 9:	_		OR	X\$18=	306	ان آمارنا (ال
IND	EPENDENT CL	AIMS	LF mir	uf minus 3 =		1		X40=			OR	X80=	900	الرياف
MULTIPLE DEPENDENT CLAIM PRESENT							1	+135:	_			+270=	<b>3</b> 0	ع ال
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTA			OR		1091	l "
CLAIMS AS AMENDED - PART II								IOIA	۱ ۲		OR	TOTAL OTHER	1096	
		(Column 1)		(Colu	mn 2)	(Column 3)		SMAL	L E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUN PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA	,	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DMG.	Total	.29	Minus	23.	7	=		X\$ 9	í		OR	X\$18=		
ME	Independent	. 4	Minus	2	l	=		X40=	_		OR	X80=		1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135	_		OR	+270=		1
								TOT	ΓAL		OR	TOTAL		1
		(Column 1)		(Coli	umn 2)	(Column 3)		ADDIT. F	EE	<u> </u>	10.,	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUI PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOZ	Total	. 45	Minus	ئ	37	= 8		X\$ 9	ı,		OR	X\$18=	144	0
ME	Independent	· 7	Minus	***	4	= 3		X40:			OR	X80=	252.0	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135			OR		1	
1	mc D							TO	ΓAL		OR	TOTAL	396	10
	124/04	(Column 1)		(Cole	umn 2)	(Column 3)		ADDIT. F	EE		1011	ADDIT. FEE	<u> </u>	1
٥		CLAIMS REMAINING		HIG	HEST MBER	PRESENT	7			ADDI-	1 \		ADDI-	┪
Ž		AFTER AMENDMENT,		PREV	/IOUSLY D FOR	EXTRA		RATI	E	TIONAL FEE		RATE	TIONAL FEE	-
AMENDMENT &	Total	. 44	Minus	**	45	=	1	X\$ 9	=	,,,,,,	OR	X\$18=	1	
MEN	Independent	.5	Minus	***	7	=		X40=	$\rightarrow$		1	\		1
	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDE	NT CLAIM		j	<b>-</b>	_	-/	OR		1	<del>.</del>
	If the entry in colu	ımn 1 is less than	the entry in col	umn 2. w	rite <b>"0" i</b> n 🗠	olumn 3.		+135			108	V 7074		4
:	If the "Highest Nu "If the "Highest Nu	imber Previously F imber Previously I inber Previously P	Paid For IN TH Paid For IN TH	IS SPACE	E is less tha E is less th	an 20, enter "20. an 3, enter "3."		ADDIT. F	EE	propriate bo	OR ox in c	ADDIT. FEE		1

FORM PTO-875 (Rev. 8/00) Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Application or Docket Number

/of 2